

Born in Cleveland ☐ YES ☒ NO

THE CLEVELAND MUSEUM OF ART
 FORTY-FIFTH ANNUAL EXHIBITION OF WORK BY ARTISTS AND CRAFTSMEN OF THE WESTERN RESERVE
 MAY 8 to JUNE 16, 1963

PLEASE
 LETTER
 PLAINLY
 OR TYPE

Collaborator if any _____

Artist _____

Dorothy Deeds Yost

FIRST NAME

LAST NAME

Address _____

883 Cambridge Rd. Cleve. Hts. 21

Cuyahoga Falls

Tel. EV. 1-4137

NO.

STREET

CITY

ZONE

COUNTY

Out-of-town residents should state whether return shipment is required. ☐ YES ☐ NO

Please enclose Registration Fee of \$2.00 (Check or Money Order) with Entry Blank..

NUMBER FOR SALE	NUMBER IN EDITION (Graphic Prts.)	PRICE	TITLE	MEDIUM	CLASS	DO NOT WRITE IN THESE COLUMNS
1	1	50.00	"UpTown" - 2 sq. Enamel plaque	enamel on steel	9	1242 R
N.F.S.	1		"Enamel Painting #1" sq. plaque	enamel on copper	9	1243 R
1	1	35.00	"Forest Frolic" oblong plaque	enamel on copper	9	1244 A
1	1	35.00	"Firescale Foliage" sq plaque	enamel on copper	9	1245 R
1	1	18.00	"Tridescence" 6" round Tray	enamel on copper	9	1246 R
N.F.S.	1		"Flight" bracelet	Jewelry enamel on copper	10	1224 R

SUBMIT ENTRY BLANK NO LATER THAN MARCH 11, 1963.

Use second blank if required

IMPORTANT

This entry blank must be fully made out, (typewritten or plainly printed) and signed.
 Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the
 Museum will have the right to dispose for its own account any entry not called for by
 July 25, 1963.

The submission of entries will be construed as acceptance of all conditions printed
 in this entry blank.

Dorothy D. Yost
 SIGNATURE

REC'D MAR 11 1963